United States Patent and Trademark Office
            - Sales Receipt -

05/08/2006 DWILLIA4 00000001 190743   10662620

01 FC:1801   790.00 DA

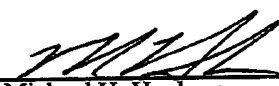|		
	Application Number	10/662,620
REQUEST FOR **CONTINUED EXAMINATION (RCE)** **TRANSMITTAL** Subsection (b) of 35 U.S.C. § 132, effective on May 29, 2000, provides for continued examination of an utility or plant application filed on or after June 8, 1995. See The American Inventors Protection Act of 1999 (AIPA).	Filing Date	September 15, 2003
	First Named Inventor	James Kanagaraj
	Group Art Unit	1651
	Examiner Name	Unknown
	Attorney Docket Number	2245.002US1
	Customer No.	21186

This is a Request for Continued Examination (RCE) under 37 CFR § 1.114 of the above-identified application entitled A NOVEL PROCESS FOR THE PREPARATION OF ALDEHYDE FROM A PROTEINOUS SOURCE.
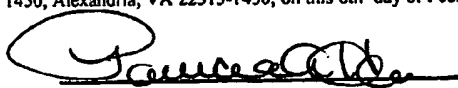
Submission required under 37 C.F.R. § 1.114

1. __ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on .

2. __ Consider the arguments in the Appeal Brief or Reply Brief previously filed on .

3. X Preliminary Amendment (6 pages) is enclosed.

4. __ New power of attorney (pages) is enclosed.

5. __ Information Disclosure Statement is enclosed (pages), with:
    a.   Form 1449 (_pages)
    b.   Copies of IDS Citations ()

6. X Please charge Deposit Account 19-0743 in the amount of $790.00 to pay the RCE filing fee required under C.F.R. § 1.17(e).

7. X **The Commissioner is hereby authorized to credit overpayments or charge any fees set forth in 37 CFR §§ 1.16 through 1.18 to Deposit Account No. 19-0743.**

8. Petition for Extension of Time in the prior application (1 page) is enclosed along with authorization to charge Deposit Account 19-0743 in the amount of to pay the extension fee.

9. __ Others:
SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A.

By:_____
Atty: Michael H. Haukaas
Reg. No. 57,111

CERTIFICATE UNDER 37 CFR 1.8: The undersigned hereby certifies that this correspondence is being filed using the USPTO's electronic filing system EFS-Web, and is addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 6th day of February, 2006.

PATRICIA A. HUILTMAN
Name

Signature

Application or Docket Number

\0 66 2 67 c

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	7	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	7 minus 20=	* 9
INDEPENDENT CLAIMS	1 minus 3 =	* 0
MULTIPLE DEPENDENT CLAIM PRESENT		☐

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	375.00	OR	BASIC FEE	750.00
X$ 9=		OR	X$18=	
X42=		OR	X84=	
+140=		OR	+280=	
TOTAL		OR	TOTAL	25 0

CLAIMS AS AMENDED - PART II

2-16 -06

AMENDMENT A		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
	Total	* 20	Minus	** 20	= 0
	Independent	* 1	Minus	*** 3	= 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐				

		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	RATE	ADDI-TIONAL FEE			RATE	ADDI-TIONAL FEE
	X$ 9=		OR		X$18=	
	X42=		OR		X84=	
	+140=		OR		+280=	
	TOTAL ADDIT. FEE		OR		TOTAL ADDIT. FEE	

AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐				

		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	RATE	ADDI-TIONAL FEE			RATE	ADDI-TIONAL FEE
	X$ 9=		OR		X$18=	
	X42=		OR		X84=	
	+140=		OR		+280=	
	TOTAL ADDIT. FEE		OR		TOTAL ADDIT. FEE	

AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐				

		RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE
		X$ 9=		OR	X$18=	
		X42=		OR	X84=	
		+140=		OR	+280=	
		TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.